

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007140

FILED
Jan 14, 2020
Secretary of State
3732750758CC

Entity Name: TAMPA BAY COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

C/O FIRSTSERVICE RESIDENTIAL
2870 SCHERER DR N STE 100
SAINT PETERSBURG, FL 33716

Current Mailing Address:

C/O FIRSTSERVICE RESIDENTIAL
2870 SCHERER DR N STE 100
SAINT PETERSBURG, FL 33716 US

FEI Number: 59-3701646

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

APPLETON, ERIC
501 E KENNEDY BLVD
SUITE 802
TAMPA, FL 33602 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ERIC APPLETON

01/14/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name SAFFREN, WILLIAM
Address C/O FIRSTSERVICE RESIDENTIAL
 2870 SCHERER DR N STE 100
City-State-Zip: SAINT PETERSBURG FL 33716

Title VP
Name KRUG, TIMOTHY
Address C/O FIRSTSERVICE RESIDENTIAL
 2870 SCHERER DR N STE 100
City-State-Zip: SAINT PETERSBURG FL 33716

Title TREASURER
Name RUSSELL, NANCY
Address C/O FIRSTSERVICE RESIDENTIAL
 2870 SCHERER DR N STE 100
City-State-Zip: SAINT PETERSBURG FL 33716

Title SECRETARY
Name GLOSS, MICHAEL J
Address C/O FIRSTSERVICE RESIDENTIAL
 2870 SCHERER DR N STE 100
City-State-Zip: SAINT PETERSBURG FL 33716

Title DIRECTOR
Name THEUS, MONTY
Address C/O FIRSTSERVICE RESIDENTIAL
 2870 SCHERER DR N STE 100
City-State-Zip: SAINT PETERSBURG FL 33716

Title DIRECTOR
Name SYPNIEWSKI, CARROLL
Address C/O FIRSTSERVICE RESIDENTIAL
 2870 SCHERER DR N STE 100
City-State-Zip: SAINT PETERSBURG FL 33716

Title DIRECTOR
Name MYSZKA, ROBERT
Address C/O FIRSTSERVICE RESIDENTIAL
 2870 SCHERER DR N STE 100
City-State-Zip: SAINT PETERSBURG FL 33716

Title DIRECTOR
Name VERSACE, SALVATORE
Address C/O FIRSTSERVICE RESIDENTIAL
 2870 SCHERER DR N STE 100
City-State-Zip: SAINT PETERSBURG FL 33716

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WILLIAM SAFFREN

PRESIDENT

01/14/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name STERNAL, SANDRA
Address C/O FIRSTSERVICE RESIDENTIAL
 2870 SCHERER DR N STE 100
City-State-Zip: SAINT PETERSBURG FL 33716

Title DIRECTOR
Name PHILLIPS , RICHARD
Address C/O FIRSTSERVICE RESIDENTIAL
 2870 SCHERER DR N STE 100
City-State-Zip: SAINT PETERSBURG FL 33716